File with: lowa Ethics and Campaign Disclosure Board

Reset Form

510 E. 12 <sup>n</sup> , Ste. 1A  Des Moines, lowa 50319  Fax: 515-281-4073	FOR INSTRUCTION DISCLOSURE	NS, SEE BACK OF FORM SUMMARY PAGE 2000	JL 16 AH 8:50
COMMITTEE NAME (Must be Carroll County Council of J	same as on Statement of Orga Republican Women	anization)	FORM DR-2 DISCLOSURE
1 )Statewide/Legislative/Judge S	of committee you are reporting for: Standing for Retention Candidate ( 5) County Candidate (6) City Cand by PAC (9) City PAC (10) School	2 State PAC (3) State Party Idate (7) School Board or Other Political Board or Other Political Subdivision PAC (	(Rev. 07/2007) REPORT  For Office Use Only 9512
CANDIDATE COMMITTEES Candidate Name	ONLY:	Political Party (if applicable)	Logged In Scanned Computer
Office Sought		District (if Senate or House)	Audited
ate reports are subject to possi	ible civil and criminal penalties. P	ursuant to lowa Code sections 68B.32A(7)	and 68A.401(3), the candidate, for a

TELEPHONE REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. July 19 I AM FILING A Indicate by # 1 (report date) Local Committees, enter Date of Election CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 1,048.22 of the last reporting period or must be zero if this is first report filed.) ..... ADD TOTAL MONEY TAKEN IN THIS PERIOD 0.35 Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)... (Schedule H applies to Candidates' Committees Only) 1,048.57 SUB-TOTAL S SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)..... Schedule F: Loan Repayments total (Attach Schedule F)..... 1,048.57 CASH ON HAND at the end of this reporting period (if final report balance must be zero) ...... \*\*UNPAID BILLS (From Schedule D - Attach Schedule D)......\$ "IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)......\$ \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)...... YES CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form  CONTRIBUTIONS MONEY TAKEN IN	Reset Form	SCHEDULE MONETAR (Rev. 07/03) RECEIPT	
(including candidate's personal funds)		CHECK THIS BOX	
COMMITTEE NAME (Must be same as on Statement of Organization)		AMENDING FORM	
Carroll County Council of Republican Women			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADD	RESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
06/05/08	ID# CK#	Iowa Savings Bank Carroll, IA 51401	Interest on account.		\$.18	
07/05/08	ID#	Iowa Savings Bank Carroll, IA 51401	Interest on account.		.17	
	ID# CK#					
	ID#					
	ID# CK#					
	1D# CK#					
	ID#					
	CK#					
	ID# CK#					
	ID# CK#					
			TOTAL (if last page	SUB-TOTAL	\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Research must be shown to see their unique register of consumpting (pioco relatives) and among (resauves by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)